

# **DIVISION OF TRAINING**



## FIRE OFFICER II PRACTICAL SKILL EVALUATION CHECK SHEET

								800
Student Name (La	st, First, MI)							
Drivers License Number				Firefighter PSID Number				
Fire Department / Agency				County				
Test Location				IDHS Course Number				
			D	ate	Pass / Fail	Evaluat	or Signature	
HUMAN RESOURCE MGMT	NFPA 1021, 2	014 Edition, 5.2.1						
	NFPA 1021, 2	0142003 Edition, 5.2.2						
ADMINISTRATION	NFPA 1021, 2	014 Edition, 5.4.1						
	NFPA 1021, 2	014 Edition, 5.4.2						
	NFPA 1021, 2	014 Edition, 5.4.3						
	NFPA 1021, 2	014 Edition, 5.4.4						
	NFPA 1021, 2	014 Edition, 5.4.5						
INSPECTION AND INVESTIGATION	NFPA 1021, 2	014 Edition2003, 5.5.1						
	NFPA 1021, 2	014 Edition, 5.5.2						
EMERGENCY SERVICE DELIVERY	NFPA 1021, 2	014 Edition, 5.6.1						
	NFPA 1021, 2	014 Edition, 5.6.2						

Turn over to complete information required on the back of this examination report.



# DIVISION OF TRAINING



### FIRE OFFICER II PRACTICAL SKILL EVALUATION CHECK SHEET

This check off sheet is intended to be used as a record of a student's performance of each skill listed and its associated NFPA objective. This sheet will serve as the permanent record for the practical skills testing of the Fire Officer II. This sheet should be used for the evaluation of the student; however, the Evaluator should refer to the Evaluator handbook, and NFPA standards for additional guidance on the proper completion of the demonstrated skill. REMEMBER: A skill may not be evaluated by the instructor who taught that skill. REPORT ANY ERRORS OR PROBLEMS TO THE IDHS CERTIFICATION SECTION 1-800-666-7784.

#### LEAD EVALUATOR CERTIFICATION OF SKILLS

I certify that the student identified on this form has successfully completed all practical skills listed. Falsification of this information may result in disciplinary action against the Instructor or Evaluator by the Board of Fire Fighter Personnel Standards and Education.

Name	Signature	
Certification Number	Date Signed	